

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 24 / 2016</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5262.26</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4410 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 24 / 2016</div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Name of Federal Candidate CLINTON, HILLARY, RODHAM, ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134148.41</div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____			

Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 24 / 2016</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2255.26</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4411 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 24 / 2016</div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Name of Federal Candidate DRISKELL, GRETCHEN, , ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2255.26</div>		Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____			

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">7517.52</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

MM / DD / YYYY

10 / 25 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee THOMPSON RYER		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2016
Mailing Address 2120 L Street, NW, #305.		Amount 740.71
City Washington	State DC	Zip Code 20037
Purpose of Expenditure Door Hangers	Category/ Type 004	Transaction ID : SE.4412 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2016
Name of Federal Candidate CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 134889.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee THOMPSON RYER		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2016
Mailing Address 2120 L Street, NW, #305.		Amount 106.45
City Washington	State DC	Zip Code 20037
Purpose of Expenditure Door Hangers	Category/ Type 004	Transaction ID : SE.4413 Date of Disbursement or Obligation MM / DD / YYYY 10 / 24 / 2016
Name of Federal Candidate DRISKELL, GRETCHEN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 2361.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	847.16
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	8364.68

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 25 / 2016

Signature